



# Incident Report

**Print Date/Time:** 07/20/2016 14:12  
**Login ID:** ss0143

Lake Stevens Police Department  
**ORI Number:** WA0311900

**Incident:** 2016-00008358

**Incident Date/Time:** 5/3/2016 4:57:00 PM  
**Location:** 2219 CEDAR RD  
LAKE STEVENS WA 98258  
**Phone Number:** (425) 238-3530  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** Collision  
**Venue:** Lake Stevens  
**Source:** 911  
**Priority:** 3  
**Status:** 3  
**Nature of Call:** 3 statements missing sign. waiting on that to upload to site

## Unit/Personnel

Unit	Personnel
19D2	SS0127-Adams
19D3	SS0130-Rutherford
19S16	SS0072-Aukerman

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	MCGEE, STEPHANIE					
2	Reporting Party	PSRBY, KRISTI /					

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
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## Disposition(s)

Disposition	Count
M	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
------	------	------	------	-------	-------------	---------	----------

## CAD Narrative

**05/03/2016 : 17:05:29 SP0379 Narrative: NEW RP SAYS NO INJ, 2 OCCS OUTSIDE VEH, NEW RP IS L/SCHMUCK F/GABRIEL 425.334.6811**

**05/03/2016 : 17:04:47 SP0348 Narrative: THINKS DRIVER MIGHT BE IMPAIRED**

**05/03/2016 : 17:04:33 SP0348 Narrative: 2ND RP WAS WITN JENNIFER JOHNSON 425 359 8007**

**05/03/2016 : 17:00:35 SP0348 Narrative: VEH PARTIALYL UP ON A LARGE BOULDER, GROUP OF ABOUT 5 TEENAGERS STANDING OUTSIDE VEH**

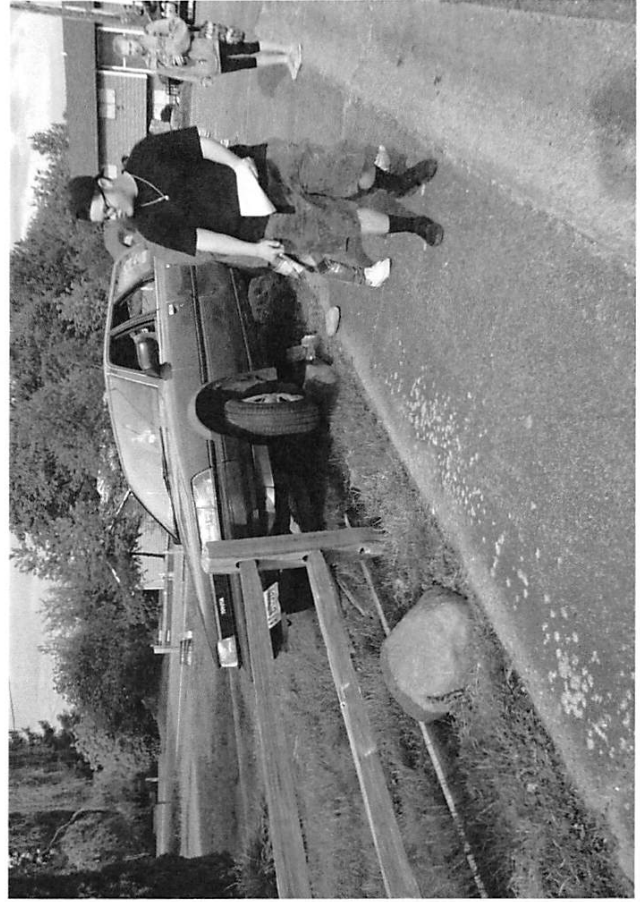
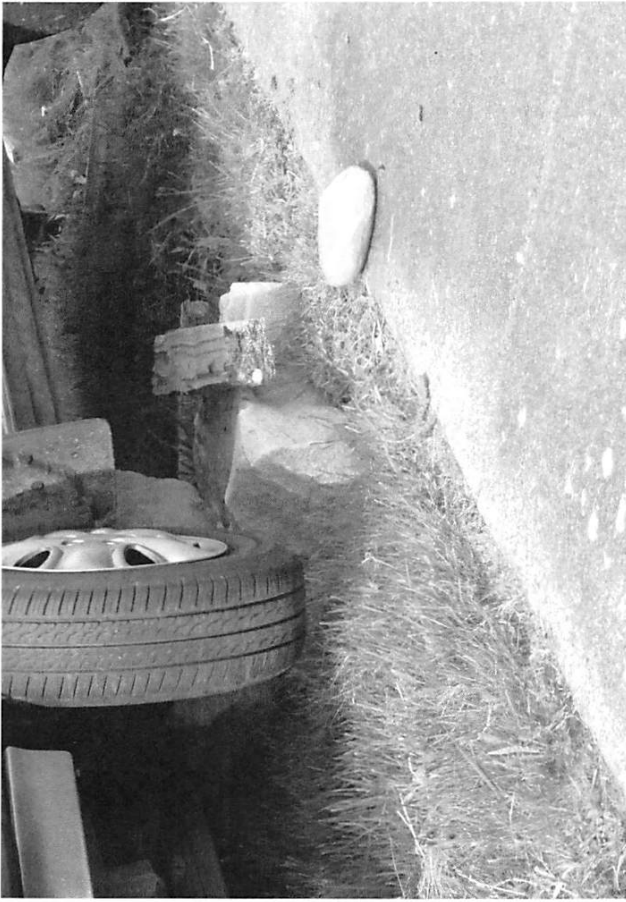
**05/03/2016 : 17:00:35 SP0414 Narrative: Narrative added from associated Call #: 291 - LR414**

**05/03/2016 : 17:00:28 SP0414 Narrative: Narrative added from associated Call #: 291 - AC, 2 AGO, NON INJ, NON BLOCKING, GRY 4 DR HATCHBACH HIT ROCKS/ FENCE**

**05/03/2016 : 17:00:16 SP0082 Narrative: BDCST**

**05/03/2016 : 16:59:50 SP0348 Narrative: GRY SUBUARU WENT OFF RDWAY , INTO SOMEONES YARD**

2404 CEDAR RD



16 8358





16-8358

Property Summary

Page 1 of 3



Printable Version

[Home](#)[Other Property Data](#)[Help](#)[Property Search](#) > [Search Results](#) > [Property Summary](#)

## Property Account Summary

Parcel Number	00385600600102	Property Address	2404 CEDAR RD , LAKE STEVENS, WA 98258-9171
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**Parties - For changes use 'Other Property Data' menu**

Role	Percent	Name	Mailing Address
Taxpayer	100	DIAR FLIP 2 LLC	12307 NE 97TH ST UNIT E, KIRKLAND, WA 98033
Owner	100	DIAR FLIP 2 LLC	12131 113TH AVE NE UNIT 201, KIRKLAND, WA 98034

**General Information**

Property Description	BAILY'S 2ND ADD TO L S SANDY BEACH TRS BLK 006 D-02 - SANDY BEACH TRSELY 144.83 FT AS MEAS ALG N LN LOT 1 AKA BLK P
Property Category	Land and Improvements
Status	Active, Locally Assessed
Tax Code Area	00408

**Property Characteristics**

Use Code	111 Single Family Residence - Detached
Unit of Measure	Acre(s)
Size (gross)	0.24

**Related Properties**

No Values Found

**Active Exemptions**

No Exemptions Found

Please wait while your current taxes are calculated. Statement of Payable/Paid For Tax Year: **2016****Distribution of Current Taxes**

District	Rate	Amount
CITY OF LAKE STEVENS	1.43	281.78
FIRE DISTRICT 08 LAKE STEVENS	1.78	351.00
LAKE STEVENS SCHOOL DIST NO 4	4.57	899.96
SNO-ISLE INTERCOUNTY RURAL LIBRARY	0.44	87.13
SNOHOMISH COUNTY-CNT	0.93	183.70
STATE	2.12	418.16
LAKE STEVENS CITY WMA		104.00
SNOHOMISH CONSERVATION DISTRICT		5.01
TOTALS	11.28	2,330.74

## Property Summary

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**Property Values**

Value Type	Tax Year 2016	Tax Year 2015	Tax Year 2014	Tax Year 2013	Tax Year 2012
Taxable Value Regular	196,900	181,400	151,500	144,000	162,900
Exemption Amount Regular					
Market Total	196,900	181,400	151,500	144,000	162,900
Assessed Value	196,900	181,400	151,500	144,000	162,900
Market Land	107,700	97,000	77,000	70,000	76,000
Market Improvement	89,200	84,400	74,500	74,000	86,900
Personal Property					

**Levy Rate History**

Tax Year	Total Levy Rate
2015	12.145206
2014	13.074286
2013	13.819751

**Real Property Structures**

Description	Type	Year Built	More Information
1 Story	Dwelling	1926	<a href="#">View Detailed Structure Information</a>

**Property Sales (since 7/31/1999)**

Transfer Date	Receipt Date	Sales Price	Excise Number	Deed Type	Grantor (Seller)	Grantee (Buyer)	Other Parcels
1/28/2016	2/8/2016	\$0	E062351	X	QUALITY LOAN SERVICE CORP	DIAR FLIP 2 LLC	No
7/24/2006	7/26/2006	\$265,000	206217	W	ROMANO SANDRA K	NEARING JEFFREY	No
9/30/2002	10/4/2002	\$176,000	370897	W	KOCH DAVID HANS & MELISSA D, H/W	ROMANO SANDRA K	No
9/30/2002	5/6/2003	\$0	374758	W	KOCH DAVID & MELISSA	ROMANO SANDRA K	No

**Property Maps**

Neighborhood Code	Township	Range	Section	Quarter	Parcel Map
2616000	29	06	07	NE	<a href="#">View parcel maps for this Township/Range/Section</a>

**Receipts**

Date	Receipt No.	Amount Applied
05/02/2016 00:00:00	8856972	1,165.37
10/28/2015 00:00:00	8496796	1,156.08
04/15/2015 00:00:00	8129500	1,156.07
10/28/2014 00:00:00	7932449	1,044.89
03/27/2014 00:00:00	7547698	1,044.88
09/24/2013 00:00:00	7277247	1,049.53
03/28/2013 00:00:00	7007939	1,049.53
10/05/2012 00:00:00	6745703	1,133.74
04/06/2012 00:00:00	6478329	1,133.74
10/06/2011 00:00:00	6208380	1,257.38
04/19/2011 00:00:00	5967515	1,257.37

**Events**

Effective Date	Entry Date-Time	Type	Remarks
02/08/2016	02/08/2016 09:52:49	Excise Processed	Temporary Excise: T034409 Finalized to: E062351
01/28/2016	02/10/2016 13:19:00	Owner Terminated	Property Transfer Filing No.: E062351 01/28/2016 by sasset
01/28/2016	02/10/2016 13:19:00	Owner Added	Property Transfer Filing No.: E062351 01/28/2016 by sasset

## Property Summary

Page 3 of 3

01/28/2016	02/08/2016 09:52:00	Excise Processed	Property Transfer Filing No.: T034409, submitted by eREET 01/28/2016 by ASCEREET
04/22/2010	04/22/2010 09:22:00	Tax Code Area Change	Property Maintenance changed TCA from 00406 to 00408 in 2010. by SASCJH
10/13/2006	10/13/2006 10:25:00	Property Characteristic Changed	2007 State Forest Fire Units changed from 0.01 to by sascab
07/24/2006	08/10/2006 10:48:00	Owner Terminated	Property Transfer Filing No.: 206217 07/24/2006 by sasmas
07/24/2006	08/10/2006 10:48:00	Owner Added	Property Transfer Filing No.: 206217 07/24/2006 by sasmas
07/24/2006	08/03/2006 13:07:00	Taxpayer Changed	Property Transfer Filing No.: 206217 07/24/2006 by strpcs
07/24/2006	07/26/2006 11:18:00	Excise Processed	Property Transfer Filing No.: 206217, Statutory Warranty Deed 07/24/2006 by strphb
01/31/2006	01/31/2006 16:37:00	Annexation Completed For Property	CTYLLKS ORD 719 - GREENSPACE - CAM WEST-added to annexation by batch process 87,261. by sascab
09/30/2002	10/04/2002 13:27:00	Excise Processed	Property Transfer Filing No.: 370897, Statutory Warranty Deed 09/30/2002 by strrjy
09/30/2002	10/04/2002 13:27:00	Taxpayer Changed	Property Transfer Filing No.: 370897 09/30/2002 by strrjy
09/30/2002	05/16/2003 13:03:00	Owner Terminated	Property Transfer Filing No.: 374758 09/30/2002 by sasset
09/30/2002	05/13/2003 09:10:00	Taxpayer Changed	Property Transfer Filing No.: 370897 09/30/2002 by sasklm
09/30/2002	05/06/2003 13:25:00	Excise Processed	Property Transfer Filing No.: 374758, Statutory Warranty Deed 09/30/2002 by strgss
09/30/2002	04/30/2003 12:01:00	Owner Added	Party/Property Relationship by sasdbn
09/30/2002	04/30/2003 12:01:00	Owner Terminated	Party/Property Relationship by sasdbn

Printable Version

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# LAKE STEVENS POLICE DEPARTMENT

## INCIDENT STATEMENT FORM

CASE NUMBER 16-8358VICTIM ☐WITNESS ☒NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE) <u>Johnson, Jennifer Helma</u>		RACE <u>W</u>	ETHNICITY	SEX <u>F</u>	D.O.B. <u>12/13/74</u>	AGE <u>41</u>	HGT <u>5</u>	WGT <u>7</u>	HAIR <u>Blk</u>	EYES <u>Blue</u>
STREET ADDRESS <u>615 79th DR NE</u>				CITY <u>Lake Stevens</u>		STATE <u>WA</u>		ZIP <u>98258</u>		
HOME PHONE <u>425-397-9021</u>		CELL PHONE <u>425-359-8007</u>			WORK PHONE					
EMAIL ADDRESS (OPTIONAL) <u>cougfam@comcast</u>					PLACE OF EMPLOYMENT <u>Olympic View Middle School</u>					

## STATEMENT:

I was following ~~the~~ the gray wagon when the driver turned left abruptly from Cedar 1st on Forest Rd. She was past the road when deciding to turn, took the turn quickly & went up on rock, down fence line, and high centered on second rock. All four passengers female driver & 3 males exited & immediately & I asked if they were OK. They all said yes.

I then took my son to practice & returned, called 911 the operator said it had already been called in. I stayed until officers arrived on scene.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:

DATE SIGNED:

5/3/16

OFFICER/NUMBER:

DATE SIGNED:

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"



Forest / Cedar 2400

8358 - 1659

X



# LAKE STEVENS POLICE DEPARTMENT

## INCIDENT STATEMENT FORM

CASE NUMBER 16-8358VICTIM ☐ WITNESS ☐NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE) <u>Mccutchen Tyler</u>		RACE <u>W</u>	ETHNICITY	SEX <u>M</u>	D.O.B. <u>11-8-98</u>	AGE <u>17</u>	HGT	WGT	HAIR	EYES
STREET ADDRESS <u>1026 86th AVE SE</u>					CITY <u>Lake Steven</u>		STATE <u>WA</u>		ZIP <u>9825</u>	
HOME PHONE <u>/</u>		CELL PHONE <u>360-296-8914</u>			WORK PHONE <u>/</u>					
EMAIL ADDRESS (OPTIONAL) <u>mccutchen5@yahoo.com</u>					PLACE OF EMPLOYMENT <u>/</u>					

## STATEMENT:

missed the turn and tried to turn late

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: Tyler Mccutchen

DATE SIGNED:

OFFICER/NUMBER: AUERMAN #12

DATE SIGNED:

5-3-16

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"

## COLLISION REPORT

STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT

1591971

REPORT NO. **E540119**CASE # **16-00008358**LOCAL AGENCY  
CODINGTOTAL # OF  
UNITS**02**OBJECT  
STRUCT**BOULDER**TRIBAL  
RESERVATION

M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	N	E	IN	OF	CITY #
DATE OF COLLISION	<b>05</b>	<b>03</b>	<b>2016</b>	<b>1659</b>	<b>31</b>									<b>0664</b>	

ON (PRIMARY TRAFFIC WAY)

INTERSECTION ☒NON-INTERSECTION ☐**CEDAR RD**BLOCK NO. ☒**2400**

MILE POST

DISTANCE

OF (REFERENCE OR CROSS STREET)

		MILES	<input type="checkbox"/>	N	<input type="checkbox"/>	E	<input type="checkbox"/>	<b>FOREST RD</b>
		FEET	<input type="checkbox"/>	S	<input type="checkbox"/>	W	<input type="checkbox"/>	

UNIT 01

MOTOR  
VEHICLE☒PEDAL-  
CYCLE☐DAMAGE THRESHOLD MET  
YES ☒ NO ☐

PHONE

**D: 4259233242**

LAST NAME

**TAVARES**

FIRST NAME

**KATLYN**MIDDLE  
INITIAL**F**STREET  
NEW ADDRESS**522 RUSSELL RD**

CITY

**SNOHOMISH**

ST

**WA**

ZIP

**982905626**

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S  
LICENSE #**TAVARKF029DK**

STATE

**WA**

SEX

**F**D.O.B.  
MMDDYYYY**03****12****1998**ON DUTY ☐

STATUS

AIRBAG

**2**

RESTR.

**4**

EJECT

**1**HELMET  
USE**2**INJURY  
CLASS**1**

NATURE OF INJURIES

LICENSE  
PLATE #**ATC3964**

STATE

**WA**

VIN#

**JT2SV21W5J0143481**TRAILER  
PLATE #

STATE

TRAILER  
PLATE #

STATE

VEH. YEAR

**1988**

MAKE

**TOYT**

MODEL

**CAM5D**

STYLE

**SW**VEHICLE TOWED  
YES ☐ NO ☒

TOWED BY

GOVT. VEHICLE  
YES ☐ NO ☒REGISTERED OWNER INFO. **LORETTA TAVARES 522 RUSSELL RD SNOHOMISH WA 98290**LIABILITY INSURANCE  
IN EFFECT☒INSURANCE CO  
& POLICY #**METROPOLITAN INS 5173658290**VEHICLE  
LEGALLY  
STANDINGYES ☐ NO ☐

CITATION #

CHARGE

VEHICLE NO. 1

SHADE IN DAMAGED AREA



UNIT 02

MOTOR  
VEHICLE☐PEDAL-  
CYCLE☐

PEDESTRIAN

☐PROPERTY  
OWNER☒DAMAGE THRESHOLD MET  
YES ☒ NO ☐

PHONE

LAST NAME

**DIAR FLIP 2 LLC**

FIRST NAME

MIDDLE  
INITIALSTREET  
NEW ADDRESS**2404 CEDAR RD**

CITY

**LAKE STEVENS**

ST

**WA**

ZIP

**98258**

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S  
LICENSE #

STATE

SEX

**U**D.O.B.  
MMDDYYYYON DUTY ☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET  
USEINJURY  
CLASS

NATURE OF INJURIES

LICENSE  
PLATE #

STATE

VIN#

TRAILER  
PLATE #

STATE

TRAILER  
PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED  
YES ☐ NO ☐

TOWED BY

GOVT. VEHICLE  
YES ☐ NO ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE  
IN EFFECT☐INSURANCE CO  
& POLICY #VEHICLE  
LEGALLY  
STANDINGYES ☐ NO ☐

CITATION #

CHARGE

VEHICLE NO. 2

SHADE IN DAMAGED AREA



OFFICER'S NAME (PRINT)

**W. AUKERMAN**

BADGE OR ID #

**0072**

AGENCY

**WA0311900**



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E540119**CASE # **16-00008358**

## ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		<b>MCTAVEN TYLER J</b>																
ADDRESS & PHONE # <b>1026 86TH AVE SE LAKE STEVENS WA 98258 3602968914</b>										SEX <b>M</b>	D.O.B. MMDDYYYY <b>11</b>	-	<b>08</b>	-	<b>1998</b>			
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	<b>1</b>	SEAT POS.	<b>3</b>	AIRBAG	<b>2</b>	RESTR.	<b>4</b>	EJECT	<b>1</b>	HELMET USE	<b>2</b>	INJURY CLASS	<b>1</b>	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		<b>BYRD GARY B</b>																
ADDRESS & PHONE # <b>502 ALDER RD GRANITE FALLS WA 98250 2534148593</b>										SEX <b>M</b>	D.O.B. MMDDYYYY <b>01</b>	-	<b>12</b>	-	<b>1999</b>			
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	<b>1</b>	SEAT POS.	<b>6</b>	AIRBAG	<b>1</b>	RESTR.	<b>4</b>	EJECT	<b>1</b>	HELMET USE	<b>2</b>	INJURY CLASS	<b>1</b>	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		<b>QUIGLEY JAMES K</b>																
ADDRESS & PHONE # <b>12800 17TH ST NE UNIT 7 LAKE STEVENS WA 98258 4253191436</b>										SEX <b>M</b>	D.O.B. MMDDYYYY <b>10</b>	-	<b>28</b>	-	<b>1997</b>			
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	<b>1</b>	SEAT POS.	<b>4</b>	AIRBAG	<b>1</b>	RESTR.	<b>4</b>	EJECT	<b>1</b>	HELMET USE	<b>2</b>	INJURY CLASS	<b>1</b>	NATURE OF INJURIES

## NARRATIVE

On 05/03/2016 at about 1659 hours I was dispatched to a single vehicle collision into a fence at the intersection of Cedar Road and Forest Road in the city of Lake Stevens.

Arriving on scene I spoke with the driver and found there had been three passengers in the vehicle at the time of the collision. There was also one witness who remained at the scene and completed a statement.

Based on evidence and statements at the scene, U1 was traveling northbound on Cedar Road and made a late left turn attempt onto westbound Forest Road (at a speed of 30-35mph in a 25mph speed zone). U1 went across the sidewalk on the north side of Forest Road, striking the fence (running westbound) and climbing several large boulders. U1 became high centered on the large boulders. The driver of U1 said she was going about 30mph and that her passengers had told her to turn; she was intending on turning at a different street.

The witness said she estimated U1's vehicle speed to be about 35mph and that the vehicle had a made a late turn at too fast of a speed.

It should be noted the fence is on the property of 2404 Cedar Road, which is vacant at this time. County records show the current tax payer on the property to be Diar flip 2 LLC. I left a copy of the collision report information and my business card on the front door of the residence.

U1 was moved off the boulders by friends of the driver and driven down the street.

There were no reported injuries at the time of the collision.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

<b>W. AUKERMAN</b>		<b>05-04-16 02:05 PM</b>	
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET	PLACE SIGNED
APPROVED BY <b>W. AUKERMAN 0072</b>		DATE <b>5/4/2016 4:32:48 PM</b>	
BADGE OR ID #	<b>0072</b>	ORI #	<b>WA0311900</b>
TIME POLICE DISPATCHED		TIME POLICE ARRIVED	
<b>4:59 PM</b>		<b>5:04 PM</b>	



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E540119**CASE # **16-00008358**

## ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		<b>JOHNSON JENNIFER H</b>																
ADDRESS & PHONE # <b>615 79TH DR NE LAKE STEVENS WA 98258 4253979021</b>										SEX <b>F</b>	D.O.B. MMDDYYYY <b>12</b>	-	<b>18</b>	-	<b>1974</b>			
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

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On 05/03/2016 at about 1659 hours I was dispatched to a single vehicle collision into a fence at the intersection of Cedar Road and Forest Road in the city of Lake Stevens.

Arriving on scene I spoke with the driver and found there had been three passengers in the vehicle at the time of the collision. There was also one witness who remained at the scene and completed a statement.

Based on evidence and statements at the scene, U1 was traveling northbound on Cedar Road and made a late left turn attempt onto westbound Forest Road (at a speed of 30-35mph in a 25mph speed zone). U1 went across the sidewalk on the north side of Forest Road, striking the fence (running westbound) and climbing several large boulders. U1 became high centered on the large boulders. The driver of U1 said she was going about 30mph and that her passengers had told her to turn; she was intending on turning at a different street.

The witness said she estimated U1's vehicle speed to be about 35mph and that the vehicle had a made a late turn at too fast of a speed.

It should be noted the fence is on the property of 2404 Cedar Road, which is vacant at this time. County records show the current tax payer on the property to be Diar flip 2 LLC. I left a copy of the collision report information and my business card on the front door of the residence.

U1 was moved off the boulders by friends of the driver and driven down the street.

There were no reported injuries at the time of the collision.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**W. AUKERMAN**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

**05-04-16 02:05 PM**

DATED

PLACE SIGNED

APPROVED BY

**W. AUKERMAN 0072**

DATE

**5/4/2016 4:32:48 PM**

BADGE OR ID #

**0072**

ORI #

**WA0311900**

TIME POLICE DISPATCHED

**4:59 PM**

TIME POLICE ARRIVED

**5:04 PM**

REPORT NO. E540119

CASE # 16-00008358

DATE AND TIME  
OF COLLISION 05/03/16 16:59

